

Independent Expenditure Form

(for persons and/or entities that are not a Political Committee)

Section 24.2-910 of the Code of Virginia

Please complete all required information from this form.

This document must be clear, legible and typed or printed in blue or black ink and may be sent by fax.

- ☐ **Independent Expenditure for a statewide election - \$500 or more.**
- ☐ **Independent Expenditure for an election other than a statewide election - \$200 or more.**

1. Name and address information:_____
INSERT FULL NAME OF PERSON OR ENTITY MAKING THE EXPENDITURE_____
MAILING ADDRESS_____
CITY_____
STATE_____
ZIP CODE_____
BUSINESS PHONE (INCLUDING AREA CODE)_____
FAX TELEPHONE_____
E-MAIL ADDRESS**2. Candidate(s) supported or opposed**

Full Name and Address of Candidate(s)	Office	Party Affiliation	Support	Oppose

3. Identify independent expenditure(s)

Date Expenditure Made	Name and mailing address (including zip) of Person or Company paid	Description of Expenditure	Amount or Value of Expenditure
		Total of this report	\$

I certify (or declare), under penalty of perjury under the laws of the Commonwealth of Virginia that this expenditure was not made in cooperation, consultation, or in concert with, or at the request or suggestion of, the above mentioned candidate, the candidate's campaign committee, or an agent of the candidate. I further certify that the above information is true, complete, and correct to the best of my knowledge.

DATE_____
SIGNATURE OF PERSON OR ENTITY RESPONSIBLE FOR MAKING INDEPENDENT EXPENDITURE